

OFFICE OF SPECIAL ACTIVITIES

ATTACHMENT

OSA HQS NOTICE NO. 230-2

PREPARATION INSTRUCTION

1. Activity Programs shall be prepared in conformance with the attached outline.

2. Each Activity Program will be assigned a number by the Programs Staff in the same manner in which RB assigns control numbers for the various projects. This number will be in addition to the control number which normally appears in the upper right corner of the document. The numbers will be assigned in numerical sequence by programs, i. e., OXC No-63-1, 63-2, etc. Supplemental Activity Programs, while retaining the number of the original Activity Program, will also be assigned numbers in numerical sequence, i. e., OXC No-63-1, Supplement No. 1. Originators preparing the Activity Program will be responsible for ensuring that each Activity Program has been properly numbered.

3. A "hold" copy of each Activity Program will be prepared to be retained in the Programs Staff until the original Activity Program has been approved and returned to the Programs Staff. After appropriate recording, the original will be filed by the Budget and Finance Branch.

4. Distribution will include:

- 1 & 2 - B&F/OSA
- 3 - PS/OSA Hold Copy
- 4 - DD/R
- 5 - DDCI
- 6 - ER
- 7 - CD/OSA
- 8 - MD/OSA (if appropriate)
- 9 - DD/OSA (if appropriate)
- 10 - Originator
- 11 - RB/OSA

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FORMAT

RB Number

Activity Program

OXC -63-1

Project Officer (name and extension)

1. Purpose - (General Statement of what work, tasks, or activity is to be accomplished.)
2. Description of work or service required. (State firm task and price. A task is "firm" when the scope of work is known, when the contractor has been selected, and when the price can be estimated within 10%.)
3. Expected additional or related work. (Unfirm tasks.)
4. Total estimated cost.
5. Source of funds, e.g.,
 - a. This specific item was not programed for, however, funds can be made available through adjustment in (other Form 1550 major heading).
 - b. This specific item was included in the OSA operational program, but additional funds will be required and can be made available through adjustments in (other Form 1550 major heading).
 - c. Funds are not available for this item from present OSA allocations. Request that funds be sought from Agency Reserve [REDACTED]

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C/B&F/OSA

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6. Delivery schedule or period of performance.

7. Remarks.

8. Signature of Requester _____

APPROVED or Recommended for APPROVAL:

JACK C. LEDFORD
Colonel, USAF
Assistant Director
(Special Activities)

Date

APPROVED or Recommended for APPROVAL:

Deputy Director (Research)

Date

APPROVED:

Deputy Director of Central Intelligence

Date

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